## **DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION**

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are stated below next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first, and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## SELF-ALIGNED MICROLENS ARRAY FOR TRANSMISSIVE MEMS IMAGE ARRAY

the specification	on of which		
<b>X</b>	is attached her	reto	
	was filed on		
	☐ as United St	tates Application N	0
	☐ as PCT Inte	rnational Application	on No
	☐ and was am	ended on	(if applicable)
			d the contents of the above-identified mendment specifically referred to above.
CFR 1.56, including	for continuation- e filing date of the	in-part applicatior he prior applicatio	material to patentability as defined in 37 ns, material information which became in and the national or PCT international
foreign application(s)	cation - I hereby for patent or in dication for paten	nventor's certificate at or inventor's cert	ority benefits under 35 U.S.C. 119 of any te listed below and have also identified tificate having a filing date before that of
Number Count	ry Filing I	Date (mm/dd/yyyy	·)
☐ § 119(e) Priority - Provisional application	•	the benefit under	r 35 U.S.C. 119(e) of the United States
Application Number		Filing Date	
Application(s) listed to application is not disc	pelow, and, inso	far as the subjec	r 35 U.S.C. 120 of any United States t matter of each of the claims of this oplication in the manner provided by the
	6(a) which occur	red between the fi	duty to disclose material information as iling date of the prior application and the n:

I hereby appoint Carrie A. Boone, Reg. No. 48,282, my patent attorney, of CARRIE A. BOONE, P.C., with an office address of 2450 Louisiana, Suite 400-310, Houston, Texas 77006, telephone 713-521-2176, as well as the persons listed on Appendix A hereto (which is incorporated by reference as a part of this document) as my respective patent attorneys and patent agents, with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith.

Address all correspondence to: Carrie A. Boone

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Customer Number: 32509

I hereby declare that all statements made of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of First Inventor: BALAKRISHNAN SRINIVASAN	Citizenship: USA
Inventor's Signature:	Date: 3/25/04
Residence (city, state): Portland, Oregon	Post Office Address: 255 SW Alderidge Dr. Portland, Oregon 97225
Full Name of Second Inventor: GARY F. SHADE	Citizenship: USA
Inventor's Signature:	Date:
Residence (city, state): Tigard, Oregon	Post Office Address: 9525 SW Elrose Street Tigard, Oregon 97224

**INT-21** 

T-503 P.002

I hereby appoint Carrie A. Boone, Reg. No. 48,282, my patent attorney, of CARRIE A. BOONE, P.C., with an office address of 2450 Louisiana, Suite 400-310, Houston, Texas 77006, telephone 713-521-2176, as well as the persons listed on Appendix A hereto (which is incorporated by reference as a part of this document) as my respective patent attorneys and patent agents, with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith.

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Full Name of First Inventor: BALAKRISHNAN SRINIVASAN	Citizenship: USA
Inventor's Signature:	Date:
Residence (city, state): Portland, Oregon	Post Office Address: 255 SW Alderidge Dr. Portland, Oregon 97225
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Inventor's Signature:  Mary 7. Shade	Date: 17ar, 30, 2004
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## Appendix A

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